

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: _____

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Survey and Certification Education Program

The State has in effect the following survey and certification periodic educational program for the staff and residents (and their representatives) of nursing facilities in order to present current regulations, procedures, and policies.

The Texas Department of Human Services and the Texas Department of Health have in effect the following educational programs in order to present current regulations, procedures, and policies:

- a.) Quarterly, three-day seminars co-sponsored with the Board of Nurse Examiners for the state of Texas, the Texas Association of Homes for the Aging, and the Texas Health Care Association. These seminars focus on regulatory update, quality resident care, survey process, policies and procedures, care planning, resident assessment, documentation, medication administration and quality assurance. These seminars are mainly directed to facility staff.
- b.) The Texas Department of Human Services and the Texas Department of Health jointly sponsor monthly training sessions the first Tuesday of each month that there is not a three-day seminar. The focus of these sessions is regulatory update, policy and procedure updates and clarifications. The seminars are directed to facility staff, residents, advocates, consultants, attorneys, and the public in general.
- c.) The Texas Department of Health regional offices conduct on-site educational programs in conjunction with open hearings in the nursing facilities. These open hearing/training sessions are provided on a scheduled and targeted or request basis.
- d.) The Texas Department of Health and the Texas Department of Human Services provide state-wide training for facility staff and residents/advocates on a scheduled basis and as requested. These training sessions are done individually by agency, jointly by agency and in collaboration with the industry representatives.

STATE <u>Texas</u>	A
DATE REC'D <u>JUN 30 1992</u>	
DATE APP'D <u>JUL 29 1992</u>	
DATE EFF <u>OCT 01 1990</u>	
HCFA 179 <u>92-23</u>	

TN No. 92-23
Supersedes
TN No. me-New Page

Approval Date JUL 29 1992

Effective Date OCT 01 1990

HCFA ID: _____